FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

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SECRETARY OF THE SENATE
PUBLIC RECORDS

12 APR 11 PM 2:52

Office Use Only

| NAME OF COMMITTEE (in full) | TYPE OR PRINT ▼ | Example: If typing, type over the lines. | 12FE4M5 | |
|--|-------------------------------|--|-----------------------------------|--|
| Firscher fo | r US Sena | te | | |
| | <u> </u> | | | · |
| ADDRESS (number and street) | 11715 Spr | ing Drive | | |
| Check if different than previously reported. (ACC) | Louisvil | le | 1 K.Y. 14.0 | 2051-[|
| 2. FEC IDENTIFICATION N | UMBER ▼C | TY A | STATE A | ZIP CODE A STATE ▼ DISTRICT |
| COO4446 | 8.7] 3. IS T REF | THIS NEW (N) OR | AMENDED (A) | Ky 60 |
| 4. TYPE OF REPORT (Ch. (a) Quarterly Reports: April 15 Quarterly July 15 Quarterly Reports | (b) 12-D | PRE-Election Report for t Primary (12P) Convention (12C) | he: General (12G) Special (12S) | Runoff (12R) |
| October 15 Quarte | L D (00) | M M / D L | / | in the State of |
| January 31 Year-E | nd Report (YE) (c) 30-D | ay POST-Election Report for | the: | |
| Termination Report | | General (30G) | Runoff (30R) | in the State of |
| 5. Covering Period O'L' O'L' A'O'L'A through O'B' A'O'L'A | | | | |
| I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Ruth Payne | | | | |
| Signature of Treasurer Date Date Date DATE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. | | | | |
| NOTE: Submission of false, error Office Use Only | eous, or incomplete informati | on may subject the person sig | | enalties of 2 U.S.C. §437g. EC FORM 3 (Rayised 02/2003) |

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